

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MT	66548	12/31/99
O.I.P.E. CLASSIFIER		12/16	12/16
FORMALITY REVIEW		12/4	1-5-99
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	3/1/02
2	✓	✓	7/1/03
3	✓	✓	11/1/03
4	✓	✓	11/1/03
5	✓	✓	11/1/03
6	✓	✓	11/1/03
7	✓	✓	11/1/03
8	✓	✓	11/1/03
9	✓	✓	11/1/03
10	✓	✓	11/1/03
11	✓	✓	11/1/03
12	✓	✓	11/1/03
13	✓	✓	11/1/03
14	✓	✓	11/1/03
15	✓	✓	11/1/03
16	✓	✓	11/1/03
17	✓	✓	11/1/03
18	✓	✓	11/1/03
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25	✓	✓	11/1/03
26	✓	✓	11/1/03
27	✓	✓	11/1/03
28	✓	✓	11/1/03
29	✓	✓	11/1/03
30	✓	✓	11/1/03
31	✓	✓	11/1/03
32	✓	✓	11/1/03
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42	✓	✓	11/1/03
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45	✓	✓	11/1/03
46	✓	✓	11/1/03
47	✓	✓	11/1/03
48	✓	✓	11/1/03
49	✓	✓	11/1/03
50	✓	✓	11/1/03

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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